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TRANSMITTAL FORM

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/766,938
		Filing Date	January 30, 2004
		First Named Inventor	Seiji ANDOH
		Group Art Unit	2891
		Examiner Name	Douglas M. Menz
Total Number of Pages in This Submission		Attorney Docket Number	030712-22

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction/Election Requirement
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Signature	
Date	August 25, 2005

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

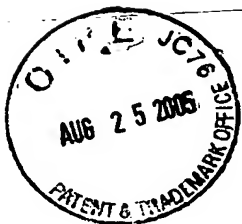
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Seiji ANDOH) Group Art Unit: 2891
Serial No. 10/766,938) Examiner: Douglas M. Menz
Filed: January 30, 2004)
For: SEMICONDUCTOR DEVICE)
)

RESPONSE TO RESTRICTION/ELECTION REQUIREMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
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Sir:

In response to the Office Action dated July 27, 2005, Applicant provides the following election.

Applicant hereby elects Species I including claim 1 directed to a semiconductor device for further prosecution in the subject application.

Should the Examiner believe a conference would be of benefit in expediting the prosecution of the instant application, he is hereby invited to telephone counsel to arrange such a conference.

Respectfully submitted,


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